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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	SS-004
	First Named Inventor	Alain Rossmann
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	herewith
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Method and Architecture for Providing Pervasive Security to Digital Assets

the specification of which (Title of the Invention)

☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)
60/339,634	12/12/2001

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Joe Zheng	Reg. No.: 39,450		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

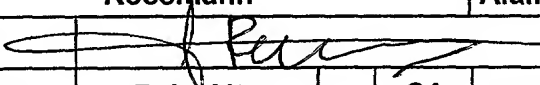
Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☒ Correspondence address below

Name	Joe Zheng				
Address	SecretSEAL Inc.				
Address	7394 Wildflower Way				
City	Cupertino	State	CA	ZIP	95014
Country	USA	Telephone	(408)777-8873	Fax	(408)873-9249

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname					
Rossmann		Alain					
Inventor's Signature				Date	2/12/02		
Residence: City	Palo Alto	State	CA	Country	USA	Citizenship	France
Post Office Address	663 Newell Avenue						
Post Office Address							
City	Palo Alto	State	CA	ZIP	94303	Country	USA

☒ Additional inventors are being named on the 4 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 4

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Patrick

Zuili

Inventor's
Signature

Date

2/12/2008

Residence: City

Palo Alto

State

CA

Country

USA

Citizenship

France

Post Office Address

696 Towle Way, Apt. 39

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State

CA

ZIP

94306

Country

USA

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Michael Michio

Ouya Ouye

Inventor's
Signature

Date

2/12/02

Residence: City

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CA

Country

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Citizenship

USA

Post Office Address

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Country

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Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

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Family Name or Surname

Serge

Humpich

Inventor's
Signature

Date

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Tournan-en-Brie

State

Country

France

Citizenship

France

Post Office Address

Domaine de Courcelles

Post Office Address

City

Tournan-en-Brie

State

ZIP

77220

Country

France

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>4</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname		
Chang-Ping			Lee		
Inventor's Signature					Date
Residence: City		State	Country	Citizenship	
Palo Alto		CA	USA	USA	
Post Office Address					
765 San Antonio Road, Apt. 65					
Post Office Address					
City		State	ZIP	Country	
Palo Alto		CA	94303	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname		
Klimenty			Vainstein		
Inventor's Signature					Date
Residence: City		State	Country	Citizenship	
Morgan Hill		CA	USA	USA	
Post Office Address					
14840 Olive Avenue #3					
Post Office Address					
City		State	ZIP	Country	
Morgan Hill		CA	95037	USA	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname		
Hal			Hilderbrand		
Inventor's Signature					Date
Residence: City		State	Country	Citizenship	
Moss Beach		CA	USA	USA	
Post Office Address					
655 Sierra Street					
Post Office Address					
City		State	ZIP	Country	
Moss Beach		CA	94038	USA	

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Denis Jacques Paul				Garcia			
Inventor's Signature						Date	2/12/2002
Residence: City	Palo Alto	State	CA	Country	USA	Citizenship	France
Post Office Address	696 Towle Way, Apt. 33						
Post Office Address							
City	Palo Alto	State	CA	ZIP	94306	Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Senthilvasan				Supramaniam			
Inventor's Signature						Date	2/12/02
Residence: City	San Calros	State	CA	Country	USA	Citizenship	Malaysia
Post Office Address	520 Elm Street, Apt. 26						
Post Office Address							
City	San Calros	State	CA	ZIP		Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Weiqing				Huang			
Inventor's Signature						Date	2/12/02
Residence: City	Sunnyvale	State	CA	Country	USA	Citizenship	PRC
Post Office Address	187 Acalanes Drive, Apt. 26						
Post Office Address							
City	Sunnyvale	State	CA	ZIP	94086	Country	USA

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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Nicholas Michael		Ryan			
Inventor's Signature	<i>Nicholas Michael Ryan</i>			Date	2/12/02
Residence: City	Sunnyvale	State	CA	Country	USA
Post Office Address	1105 Vasquez Avenue				
Post Office Address					
City	Sunnyvale	State	CA	ZIP	94086
				Country	USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Inventor's Signature				Date	
Residence: City		State		Country	
Post Office Address					
Post Office Address					
City		State		ZIP	
				Country	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Inventor's Signature				Date	
Residence: City		State		Country	
Post Office Address					
Post Office Address					
City		State		ZIP	
				Country	

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